

DRIVING SCHOOL
RENEWAL APPLICATION

DMV USE ONLY

License
NumberExpiration
DateDate
Processed

Fee

INSTRUCTIONS →

COMPLETE **A** **B** **C** **D** and **E** → REVIEW CHECKLIST **F**→ FOLLOW MAILING INSTRUCTIONS **G**

Please note: Fill in all required information and sign this form. If using a pen, print clearly in blue or black ink. Make a copy for your records and mail the completed, signed form to the address noted on page 2. **Driving School licences are renewed for two years.**

A BUSINESS INFORMATION

Name of Driving School			Phone Number	
Address of School		City	State	Zip Code
Branch Name and Address				If more than 2 branches, attach additional sheet
Branch Name and Address				
Last Name of Owner or Principal Authorized Official		First	M.I.	Fax Number
Type of Business (check one of the following) <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Other (describe) _____			Federal ID Number	
NOTE: Businesses regulated by the Department of Motor Vehicles are required to provide their Social Security numbers and Federal ID numbers to the Department of Taxation and Finance, upon request, for tax administration purposes pursuant to Section 5 of the New York State Tax Law.				
E-mail Address		Driving School Website Address		

B SERVICES: Indicate ALL services your driving school provides.

1. What type(s) of vehicles(s) are you using for instruction? [check all that apply]:

☐ Auto ☐ Bus ☐ Motorcycle ☐ Tractor-Trailer ☐ Truck ☐ None

(If your driving school provides vehicles for instruction, you **MUST** attach a completed form MV-527, List of Driving School Vehicles)

CHECK ONE

2. Do you teach the Pre-Licensing Course? (If "yes" you **MUST** attach a completed form MV-278.6, Authorized Signature List - Pre-Licensing Course)YES NO
☐ ☐

3. Do you provide any Private Service Bureau (PSB) functions?

☐ ☐

4. Do you teach the Point and Insurance Reduction Program (PIRP)? (If "yes", provide the name(s) of your Delivery Agency and Sponsor in the space below)

☐ ☐

Delivery Agency Name: _____

Sponsor Name: _____

Delivery Agency Name: _____

Sponsor Name: _____

(If more than two, list names on separate page)

C ANSWER ALL QUESTIONS:

CHECK ONE

1. Has there been any change of owner, partner, corporate officer, major stockholder or managing member of the driving school?

YES NO
☐ ☐

2. Have any of the owners, partners, corporate officers, managing members or major stockholders been convicted of a crime or felony involving violence, dishonesty, deceit, indecency, degeneracy or moral turpitude? (If "yes", attach sheet with explanation)

☐ ☐

3. Do you contract with any public or private high schools and or colleges to provide part of a Driver Education Course?

☐ ☐

- D WORKERS' COMPENSATION and DISABILITY BENEFITS INSURANCE COVERAGE:** You must include proof with your renewal application. Workers' Compensation Law (Section 57) and the Disability Benefits Law (Section 220, subdivision 8) require you to provide proof that you have obtained the appropriate workers' compensation and disability benefits insurance coverage for any paid and unpaid employees. With this application you **must** attach proof of Workers' Compensation:

☐ Workers' Compensation, form **C-105.2** or **U-26** **AND** ☐ Disability Benefits Insurance, form **DB-120.1**

OR

☐ Signed copy of form **CE-200**, *Application for Certificate of Attestation of Exemption*, found at labor.ny.gov

Please note: **form C-105 and form DB-120 are NOT acceptable proof.**

- E CERTIFICATION:** Each owner, partner, corporate officer or managing member of the driving school must sign in the space provided below. As a condition for the issuance and the continued validity of a driving school license, the individuals signing this application agree to the following conditions:

- ◆ to comply with all of the provisions of the New York State Vehicle and Traffic Law and the rules and regulations of the Commissioner,
- ◆ to comply with all state laws and regulations and all municipal ordinances and regulations relating to public health and public safety for the school and business facility, and
- ◆ to employ (or otherwise make use of) instructors who have been properly certified by the State of New York to instruct at the applicant's driving school.

All of the individuals signing this application affirm that they have read the entire application, that they are familiar with all of its contents, and that all answers and statements made in connection with this application are true. *Each owner, partner, corporate officer, and managing member* of the driving school must sign in the space provided below.

To knowingly make a false statement or conceal a material fact in this application is a criminal offense, and may result in the revocation of your driving school license. False statements are punishable under Section 210.45 of the Penal Code.

Print Name	Title
Signature (Owner or Authorized Official) X	Date
Print Name	Title
Signature (Owner or Authorized Official) X	Date
Print Name	Title
Signature (Owner or Authorized Official) X	Date

- F CHECKLIST: All renewal applications must include the following:**

☐ **Form MV-522** *Driving School Renewal Application* (completed and signed)
Your application must be signed by each owner/partner/corporate officer/managing member (*section E*)

☐ **Form C-105.2** or **U-26.3** *Proof of Workers' Compensation* **AND** **form DB-120.1** Disability Benefits **OR**
A signed copy of **form CE-200**, *Application for Certificate of Attestation of Exemption* (*see section D*)

Please note: **Form C-105 and Form DB-120 are NOT acceptable proof.**

☐ Check or money order payable to the Commissioner of Motor Vehicles (starter checks are **NOT** acceptable).

Driving School two-year renewal = \$100.00 Branch Office two-year renewal = \$3.00

DRIVING SCHOOL LICENSES MUST BE RENEWED FOR TWO YEARS.

SERVICES: For services that your driving school provides (see section B), include the following:

☐ **IF YOUR DRIVING SCHOOL USES VEHICLES FOR INSTRUCTION, YOU MUST ATTACH:**
form MV-527 *List of Driving School Vehicles* (completed and signed)

☐ **IF YOUR DRIVING SCHOOL PROVIDES THE PRE-LICENSING COURSE, YOU MUST ATTACH:**
form MV-278.6 *Authorized Signature List - Pre-Licensing Course* (completed and signed)

- G MAILING INSTRUCTIONS:**

1. Make a copy of the renewal application and all documents for your files.
2. Mail the renewal application form, all required documentation and the fee to:
*NYS Department of Motor Vehicles, Bureau of Driver Training Programs, Certification and Oversight,
6 Empire State Plaza, Rm 327, Albany NY 12228.*